

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 1079955
APPLICANT(S)

FILING DATE

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
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50		/				
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

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100						
TOTAL IND.	2					
TOTAL DEP.	35					
TOTAL CLAIMS	37					